



DEPARTMENT OF DEFENSE

TRICARE Europe Office

UNIT 10310

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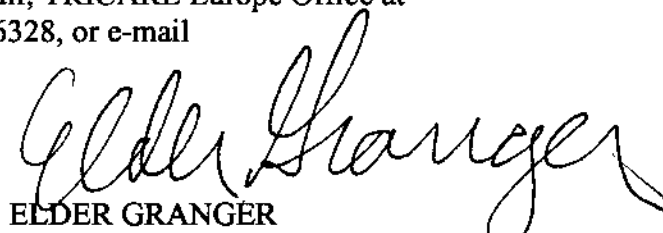
MEMORANDUM FOR COMMANDER, ERM
FLEET MEDICAL OFFICER, CINCUSNAVEUR
COMMAND SURGEON, USAF
COMMAND SURGEON, EUROM

SUBJECT: Interim Policy Memorandum – Women, Infants and Children Overseas Program

The Under Secretary of Defense for Personnel and Readiness has issued interim policy guidance for the Women, Infants and Children (WIC) Overseas Program. The policy memorandum (Attachment 1) defines the roles and responsibilities of organizations participating in WIC Overseas. Responsibilities for TRICARE Management Activity, TRICARE overseas Lead Agents, Medical Treatment Facilities (MTFs), installation commanders, and the contractor are clearly delineated.

This policy applies to all the MTFs in the TRICARE Europe Region. Each MTF Commander must establish mechanisms to accomplish the required laboratory studies (a hemoglobin or hematocrit for pregnant women during pregnancy, for postpartum women after delivery, and for infants and children between six and twelve months of age then annually until age 5 while still in the program). In order to comply with the Privacy Act of 1974, each MTF commander must ensure that the supported WIC Office has a mechanism to document lawful requests for laboratory results. The two most common mechanisms are expected to be a written periodic request from the WIC Office to the MTF for specific laboratory results for specific participants, or inclusion of a consent form that the participant signs at time of initial enrollment in the program, authorizing release of this information to the WIC Office by the MTF (attachment 2).

My point of contact is LTC Muriel Metcalf, TRICARE Europe Office at DSN 496-6328, commercial 49 (0)6302 67 6328, or e-mail muriel.metcalf@europe.tricare.osd.mil.


ELDER GRANGER
Brigadier General, MC, USA
Lead Agent

Attachments:

1. Interim Policy Memorandum – Women, Infants and Children Overseas Program
2. Local Guidance and Policy for European Theater WIC Blood Screening Procedures



UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

Atch 1

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PERSONNEL AND
READINESS

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)
ASSISTANT SECRETARY OF THE NAVY (M&RA)
ASSISTANT SECRETARY OF THE AIR FORCE (MR)

SUBJECT: Interim Policy Memorandum -- Women, Infants, and Children Overseas Program

References.

- a. Section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786).
- b. Section 674 of the Fiscal Year 2000 National Defense Authorization Act (P.L. 106-65, October 5, 1999).
- c. 10 U.S.C., chapter 53, Section 1060a, "Special Supplemental Food Program."

Purpose. To define the roles and responsibilities of the key stakeholders and other players participating in the Women, Infants, and Children (WIC) Overseas program, including the TRICARE Management Activity, TRICARE overseas Lead Agents, Medical Treatment Facilities (MTFs), installation commanders, and the contractor.

Background. In 1999, Congress mandated that the Department of Defense establish and fund a program to provide a special supplemental food and nutrition education program to low-income families overseas whose members have been determined to be at nutritional risk. (Reference (b)). The intent was to provide to members of the armed forces and defined eligible civilians stationed or living overseas, benefits that are similar to those provided domestically through the U.S. Department of Agriculture's Women, Infants, and Children program. (Reference (a)). The DoD program, codified at 10 U.S.C. § 1060a (reference (c)), has become known as "WIC Overseas." The Secretary of Agriculture provides technical assistance to DoD, as needed.

Within the Office of the Secretary of Defense, the WIC Overseas program is managed by the Executive Director, TRICARE Management Activity (TMA). While WIC Overseas is not a program to deliver medical care, it is designed to improve the participants' health, wellness, and overall quality of life. TMA's primary function is one of program management, coordination, and oversight; however, TMA is not solely responsible for the program's implementation. Many diverse organizations and entities have key roles in the program, with responsibilities shared among them. Major stakeholders in the WIC Overseas program include installation commanders; TRICARE Lead Agents in Europe, the Pacific, and Latin America; the MTFs; and commissaries/Navy Exchange Markets (NEXMARTS). In addition, the primary on-the-ground contractor is a key player, providing most of the program's operational support.

Responsibilities.

- a. TRICARE Management Activity (TMA) is responsible for:
 1. Overall program management.
 2. Funding through the Defense Health Program (DHP).



3. Contractor oversight (Contracting Officer Representative (COR)).
4. Management of the Integrated Program Team (IPT).
5. Resolution of disputes/contested issues.
6. Management of web-site on TMA home page.
7. Primary interface with Congress, Department of Agriculture, and other federal agencies.
8. Verifying, facilitating, and administering information systems security and certification.

b. TMA Overseas Lead Agents are responsible for:

1. Primary interface with installation commanders.
2. Identification of specific sites for WIC Overseas implementation.
3. Primary theater coordination with contractor.
4. Primary liaison with CINC and other theater military components.
5. Coordination with theater Medical Treatment Facilities (MTFs) on clinical issues affecting the program, e.g., blood screening.

c. Installation Commanders are responsible for:

1. Identification of the location for the WIC Overseas office at each site.
2. Refurbishment, repairs, and any other structural modifications of a location site to make it suitable for a WIC Overseas office.
3. Identification of installation Point of Contact (POC) for all WIC Overseas issues.
4. Assignment of installation Contracting Officer Technical Representative (COTR).
5. Provision of utilities (e.g. electricity; water; heating/air conditioning) for the WIC Overseas office.
6. Provision of telephone and computer LAN connectivity, to include worldwide lines for fax machines and worldwide access, area-wide DSN, and area-wide local lines.
7. Provision of telephone equipment and services, to include long-distance services.
8. Provision of housekeeping services (e.g., cleaning, trash removal, snow removal, etc.) for the WIC Overseas office.
9. Provision of building maintenance services, inside and out, to include painting, repairs, etc.
10. Provision of IM/IT support.
11. Coordination/request of National Agency Checks (NAC) for WIC Overseas employees.

Note: Any services or support listed above that is provided to the WIC Overseas office by the installation is the installation's responsibility (as host) and shall not be billed back to the WIC Overseas office, TMA, the MTF, TMA Overseas Lead Agent, the contractor, or the DHP. An exception to this is fees incurred by the program for long distance telephone calls; these may be billed to the program.

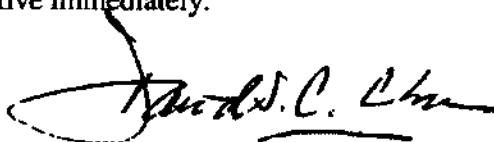
d. Medical Treatment Facilities (MTF) are responsible for:

1. Providing blood test screening or, upon request of a patient or a WIC Overseas office, results of a blood test screening if performed within the required time period, for each WIC Overseas participant.

2. Coordinating with the WIC Overseas office for the transfer of information on participants' blood work, etc.
 3. Accepting referrals from, and providing referrals to, the WIC Overseas office, when warranted.
- e. Commissaries/NEXMARTs are responsible for:
1. Maintaining inventory levels of WIC Overseas-approved food items sufficient for all WIC Overseas patrons to redeem their drafts (food vouchers) at any time during the period for which the drafts are valid.
 2. Training commissary/NEXMART personnel regarding applicable WIC Overseas program procedures.
 3. Facilitating transfer of drafts and other documents to designated entities for payment or verification, as necessary.
- f. Contractor is responsible for:
1. Hiring, training, and supervising all WIC Overseas personnel, to include a theater liaison, regional managers, and office staff (Competent Professional Authorities and Administrative Assistants).
 2. Acquisition of WIC Overseas office equipment and supplies, to include furniture, computer hardware/peripherals, photocopying machines, fax machines, consumables, etc.
 3. Implementation of day-to-day WIC Overseas office procedures and protocols.
 4. Provision of nutrition education services to participants, including educational materials.
 5. Creating and distributing promotional and informational materials.
 6. Printing, issuing, and reconciling of the WIC Overseas food instruments (drafts), including all financial accounting and auditing associated therewith.
 7. Program data collection, processing, and reporting.
 8. Provision of information to WIC Overseas employees, in accordance with DoD information technology requirements, for National Agency Checks (NAC).
 9. Performing other program support functions consistent with legal requirements and as directed by the cognizant Contracting Officer.

Effective Date.

This memorandum is effective immediately.

A handwritten signature in black ink, appearing to read "David S. C. Chu", with a stylized flourish at the end.

David S. C. Chu

Local Guidance and Policy for European Theater WIC Blood Screening Procedures

1. Implementation of the WIC Overseas Program is a Congressionally-mandated requirement. It has line-related, administrative, educational, and medical components.
2. The WIC blood screening requirement is for a screening hemoglobin or hematocrit. A full CBC is unnecessary unless it is the only mechanism to obtain the screening hemoglobin or hematocrit. The TRICARE Europe Executive Steering Committee has endorsed the purchase of fingerstick testing equipment such as HemaCue® (approximately \$600) for labs currently unable to perform focal screening hemoglobin and hematocrit tests.
3. If there has not been a hemoglobin or hematocrit drawn within WIC program time guidelines, one must be ordered. If a test result from the defined time window is already available in CHCS, a repeat test is not necessary. The screening requirements are:

a. Pregnant women	During current pregnancy
b. Postpartum women	After delivery (normally done while still in hospital)
c. Infants and children	Once between 6 and 12 months of age; then annually until age 5 while still in the program
d. Infants and children with anemia history	Every 6 months
4. Order entry for the WIC participant's blood screening test should either be in his or her Primary Care Manager's (PCM) name or be associated with a mechanism to inform the PCM in the event of an abnormal result. PCM involvement is important, in order to maintain continuity of care in our population health paradigm. It should not require or waste a patient care appointment unless one is otherwise indicated.
5. The WIC Office, in consultation with their affiliated MTF(s), must establish clear mechanisms for order entry and for a methodology for results to be referred back to the WIC office. WIC sites and MTFs have evolved different mechanisms depending on their unique environment (e.g., size of MTF, location of WIC office relative to location of MTF, presence of network firewalls). Two common mechanisms of release of this clinical information from the MTF to a WIC Office are: the patient retrieves their result directly from the MTF, and the WIC Office submits to the MTF a list of names of participants they need results for. Since this screening test is a requirement of a federally mandated program, the participant's prior approval is not required for release of information. Service regulations such as AR 25-55, para 5-103a(3)(b) and AR 340-21, para 3-2c(5) support this transfer of information, and is similar to the way information is transferred in CONUS WIC programs.
6. WIC offices should not be the location of point of care testing in the European theater.